

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Adair County Street Address    1204 Greensburg Street City, State Zip    Columbia, KY 42728	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact             Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                 Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001837 Cycles 9 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$217,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Ballard County Street Address    3465 Paducah Road City, State Zip    Barlow, KY 42024	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001838 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$150,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Barren County Street Address    202 W Washington Street City, State Zip    Glasgow, KY 42141-2416	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001839 Cycles 8, 9 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 \$787,500; MUNIS 5504C \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Berea Independent Street Address    3 Pirate Pkwy. City, State Zip    Berea, KY 40403	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001840 Cycle 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$112,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Bourbon County Street Address    3343 Lexington Road City, State Zip    Paris, KY 40361	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001841 Cycle 8 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:</b> <b>MUNIS 5504 \$75,000; MUNIS 5504C \$75,000; MUNIS 5504X \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Boyd County Street Address    1104 Bob McCullough Dr. City, State Zip    Ashland, KY 41102	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001842 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504C Amount \$60,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Boys & Girls Club Inc. Street Address    1201 Story Ave., Suite 250 City, State Zip    Louisville, KY 40206	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001890 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$126,578</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 5, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Boys & Girls Club of Greater Cincinnati Street Address      600 Dalton Avenue City, State Zip      Cincinnati, OH 45203	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address      500 Mero St., 19th Fl. CPT Budget Contact      Martha Johnson 502-564-1979 ext. 4358 Street Address      500 Mero St., 16th Fl. CPT City, KY Zip      Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description      21 <sup>st</sup> Century Community Learning Centers Fund Source      No Child Left Behind Act, Title IV, Part B CFDA#      84.287C MUNIS Project Number      See budget on contract MOA Number      PON2 1400001891 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 15, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Bullitt County Street Address    1040 Hwy. 44E City, State Zip    Shepherdsville, KY 40165	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001843 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$300,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Campbell County Street Address    101 Orchard Ln. City, State Zip    Alexandria, KY 41001	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001844 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$600,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 20, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Campbellsville Ind Street Address    136 S Columbia City, State Zip    Campbellsville, KY 42718	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001845 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Carroll County Street Address    813 Hawkins Street City, State Zip    Carrollton, KY 41008	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001846 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$150,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 13, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Casey County Street Address    1922 N. US 127 City, State Zip    Liberty, KY 42539	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1300000079 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other: _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount: MUNIS 5504C Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Caverna Independent Street Address    1102 N. Dixie Hwy. City, State Zip    Cave City, KY 42127	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001848 Cycle 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$112,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Christian County Street Address    200 Glass St. City, State Zip    Hopkinsville, KY 42240	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                 Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001849 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Cloverport Independent Street Address    214 W. Main St. City, State Zip    Cloverport, KY 40111	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001850 Cycle 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$112,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Corbin Independent Street Address    108 Roy Kidd Avenue City, State Zip    Corbin, KY 40701	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001851 Cycles 8,9,10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:</b> <b>MUNIS 5504 \$75,000; MUNIS 5504C \$75,000; MUNIS 5504X \$67,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Covington Independent Street Address    25 E. Seventh St. City, State Zip    Covington, KY 41011	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact             Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                 Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1300000088 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other: _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount: MUNIS 5504 Amount \$150,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits <span style="float: right;"><b>Date:</b> September 25, 2014</span>		

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Covington Independent Street Address    25 E. Seventh St. City, State Zip    Covington, Ky 41011	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                 Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001852 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$210,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Crittenden County Street Address    601 W. Elm St. City, State Zip    Marion, KY 42064	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                 Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001853 Cycles 9 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount    \$262,500</b>  (See MOA for Budget breakdown)	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 22, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Cumberland County Street Address    810 N. Main St. City, State Zip    Burkesville, KY 42717	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001854 Cycles 9 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 \$112,500; MUNIS 5504C \$150,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Fayette County Street Address    PO Box 55490 City, State Zip    Lexington, KY 40555	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001855 Cycles 8 & 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:</b> <b>MUNIS 5504 \$150,000; MUNIS 5504X \$67,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Floyd County Street Address    106 North Front Avenue City, State Zip    Prestonburg, KY 41653	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001857 Cycle 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$112,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 22, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Fulton County Street Address    2780 Moscow Ave. City, State Zip    Hickman, KY 42050	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001858 Cycles 8 & 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504M \$112,500; MUNIS 5504H \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 5, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Fulton Independent Street Address    304 West State Line City, State Zip    Fulton, KY 42041	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001859 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$150,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Glasgow Independent Street Address    629 W. Cherry St. City, State Zip    Glasgow, KY 42142	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001860 Cycle 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$112,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Grayson County Street Address    909 Brandenburg Rd. City, State Zip    Leitchfield, KY 42754	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001861 Cycles 8 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$225,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Greenup County Street Address    45 Musketeer Dr. City, State Zip    Greenup, KY 41144	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001862 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504C Amount \$150,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Hancock County Street Address    83 State Rd. City, State Zip    Hawesville, KY 42348	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001863 Cycle 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$112,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Harlan County Street Address    251 Ball Park Rd. City, State Zip    Harlan, Ky 40831	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001864 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Hazard Perry County Community Ministries Street Address    151 Miss Edna Ln. City, State Zip    Hazard, KY 41701	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                 Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001892 Cycles 9 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$262,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Henderson County Street Address    1805 Second Street City, State Zip    Henderson, KY 42420	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001865 Cycles 9 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 \$112,500; MUNIS 5504J \$150,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Hickman County Street Address    416 Waterfield Dr. N. City, State Zip    Clinton, KY 42031	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001866 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Jackson Independent Street Address    940 Highland Ave. City, State Zip    Jackson, KY 41339	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001867 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Jenkins Independent Street Address    269 Old Highway 3086 City, State Zip    Jenkins, KY 41537	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001868 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$60,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Kenton County YMCA Street Address    1055 Eaton Dr. City, State Zip    Fort Wright, KY 41017	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001893 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504C Amount \$60,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 5, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Knott County Street Address    1156 Hindman Bypass City, State Zip    Hindman, KY 41822	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001869 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$150,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Lee County Street Address    242 Lee Ave. City, State Zip    Beattyville, KY 41311	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1300000124 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount: MUNIS 5504C Amount \$60,000</b> <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits <span style="float: right;"><b>Date:</b> September 25, 2014</span>		

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Leslie County Street Address    27 Eagle Ln. City, State Zip    Hyden, KY 41749	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001871 Cycles 9 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 \$112,500; MUNIS 5504X \$150,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Letcher County Street Address    224 Parks St. City, State Zip    Whitesburg, KY 41858	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001872 Cycles 8 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$225,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Lighthouse Promise, Inc Street Address    5312 Old Sheperdville Rd. City, State Zip    Louisville, KY 40228	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact             Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                 Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001894 Cycles 8 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 \$67,500; MUNIS 5504X \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Lincoln County Street Address    305 Danville Ave. City, State Zip    Stanford, KY 40484	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001873 Cycle 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504H Amount \$112,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Livingston County Street Address    127 E. Adair St. City, State Zip    Smithland, KY 42081	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001874 Cycles 8 & 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$262,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Lotts Creek Community School Street Address    5837 Lotts Creek Road City, State Zip    Hazard, KY 41701-9024	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001895 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Lyon County Street Address    217 Jenkins Rd. City, State Zip    Eddyville, KY 42038	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001875 Cycle 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 X    Amount \$67,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      McCracken County Street Address    404 South Main Street City, State Zip    Jamestown, KY 42629	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001876 Cycles 9 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$262,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Metcalfe County Street Address    109 Sartin Dr. City, State Zip    Edmonton, KY 42129	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001877 Cycles 8 & 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 \$75,000; MUNIS 5504X \$67,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Monroe County Street Address    309 Emberton Street City, State Zip    Tompkinsville, KY 42167-1431	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant    Brigitte Stacy 502-564-1473 ext. 4072 Street Address            500 Mero St., 19th Fl. CPT Budget Contact          Martha Johnson 502-564-1979 ext. 4358 Street Address            500 Mero St., 16th Fl. CPT City, KY Zip                Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description              21 <sup>st</sup> Century Community Learning Centers Fund Source              No Child Left Behind Act, Title IV, Part B CFDA#                      84.287C MUNIS Project Number   See budget on contract MOA Number              PON2 130000154 Cycles 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other: _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount: MUNIS 5504C \$67,500</b> (See MOA for Budget breakdown)	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		
		<b>Date:</b>	September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Monroe County Street Address    309 Emberton Street City, State Zip    Tompkinsville, KY 42167-1431	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001878 Cycles 8,9&10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:</b> <b>MUNIS 5504 \$135,000; MUNIS 5504X \$ 142,500</b>  (See MOA for Budget breakdown)	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Morgan County Street Address    212 University Dr. City, State Zip    West Libery, KY 41472	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001879 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$60,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Nelson County Street Address    288 Wildcat Lane City, State Zip    Bardstown, Ky 40004	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001880 Cycle 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$112,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Newport Independent Street Address    301 E. Eighth St. City, State Zip    Newport, KY 41071	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001881 Cycles 8 & 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 \$75,000; MUNIS 5504X \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Paducah Independent Street Address      800 Caldwell St. City, State Zip      Paducah, KY 42003	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address      500 Mero St., 19th Fl. CPT Budget Contact      Martha Johnson 502-564-1979 ext. 4358 Street Address      500 Mero St., 16th Fl. CPT City, KY Zip      Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description      21 <sup>st</sup> Century Community Learning Centers Fund Source      No Child Left Behind Act, Title IV, Part B CFDA#      84.287C MUNIS Project Number      See budget on contract MOA Number      PON2 1400001882 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$150,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Pleasant Green Baptist Church Street Address    P.O. Box 910240 City, State Zip    Lexington, KY 40591	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1300000165 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other: _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount: MUNIS 5504C Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Pleasant Green Baptist Church Street Address    P.O. Box 910240 City, State Zip    Lexington, KY 40591	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001896 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 550AC Amount \$75,000</b>  (See MOA for Budget breakdown)	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 22, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Pulaski County Street Address    501 East University Dr. City, State Zip    Somerset, KY 42502	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001883 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits <span style="float: right;"><b>Date:</b> September 25, 2014</span>		





***PROFICIENT & PREPARED FOR***  
**S U C C E S S**

---

KENTUCKY DEPARTMENT OF EDUCATION

### Award Notification

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Pleasant Green Baptist Church Street Address    P.O. Box 910240 City, State Zip    Lexington, KY 40591	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact             Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001896 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other: _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount: MUNIS 550AC Amount \$75,000</b>  (See MOA for Budget breakdown)	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 22, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Pulaski County Street Address    501 East University Dr. City, State Zip    Somerset, KY 42502	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001883 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      RC Durr YMCA Street Address    1105 Elm Street City, State Zip    Cincinnati, OH 45202	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001897 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Save the Children Street Address    126 Main Street City, State Zip    Berea, KY 40403	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001898 Cycle 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$112,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Taylor County Street Address    207 West Main Street City, State Zip    Taylorsville, KY 40071	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001884 Cycles 8 & 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount: MUNIS 5504E \$67,500; MUNIS 5504H \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Todd County Street Address    205 Airport Rd. City, State Zip    Elkton, KY 42220	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001885 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$150,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Wayne County Street Address    1025 South Main Street City, State Zip    Monticello, KY 42633	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001886 Cycle 8	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 \$75,000; MUNIS 5504C \$60,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014



**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Whitley County Street Address    300 Main Street City, State Zip    Williamsburg, KY 40769	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001887 Cycles 8 & 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$285,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Wolfe County Street Address    85 Main St. City, State Zip    Campton, KY 41301	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001888 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$150,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      Woodford County Street Address    330 Pisgah Pk. City, State Zip    Versailles, KY 40383	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact              Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                  Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                  21 <sup>st</sup> Century Community Learning Centers Fund Source                  No Child Left Behind Act, Title IV, Part B CFDA#                          84.287C MUNIS Project Number      See budget on contract MOA Number                  PON2 1400001889 Cycle 9	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504 Amount \$112,500</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>14</b>	<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014

**Kentucky Department of Education  
Award Notification**

<b>1</b>	<b>Name and Address of Recipient:</b> Agency Name      YMCA of Greater Cincinnati Street Address    1105 Elm Street City, State Zip    Cincinnati, OH 45202	<b>7</b>	<b>Fund Type:</b> <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
<b>2</b>	<b>KDE Contact Information:</b> Program Consultant      Brigitte Stacy 502-564-1473 ext. 4072 Street Address              500 Mero St., 19th Fl. CPT Budget Contact            Martha Johnson 502-564-1979 ext. 4358 Street Address              500 Mero St., 16th Fl. CPT City, KY Zip                 Frankfort, Kentucky 40601	<b>8</b>	<b>Method of Payment:</b> <input type="checkbox"/> Federal Cash Request <input checked="" type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
<b>3</b>	<b>Description/Fund Source of Award and Fiscal Year:</b> Description                21 <sup>st</sup> Century Community Learning Centers Fund Source                No Child Left Behind Act, Title IV, Part B CFDA#                        84.287C MUNIS Project Number    See budget on contract MOA Number                PON2 1400001899 Cycle 10	<b>9</b>	<b>Reimbursement Frequency:</b> <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
<b>4</b>	<b>Grant Authority (Source):</b> No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	<b>10</b>	<b>Financial Reporting Method:</b> <input type="checkbox"/> Electronic Submission <input checked="" type="checkbox"/> Other      Submission of quarterly reimbursement package
<b>5</b>	<b>Award Amount:    MUNIS 5504C Amount \$75,000</b>  <a href="#">(See MOA for Budget breakdown)</a>	<b>11</b>	<b>Evaluations:</b> Submission of an annual report to Kentucky Department of Education is required
<b>6</b>	<b>Period of Award:</b> August 1, 2014 - September 30, 2015		
<b>12</b>	<b>Consortia/Partnership Members:</b>		
<b>13</b>	<b>Special Instructions/Conditions:</b> <i>Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance &amp; Administration Cabinet.</i>		
<b>Authorized By (Name/Title):</b> Donna Tackett, Director Division of Consolidated Plans & Audits		<b>Date:</b> September 25, 2014	